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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.	03/056 NUT
		First Inventor	Susanne RATHJEN
		Title	Mixtures of sucrose or high fructose corn syrup (HFCS) 42 or HFCS 55 and high-intensity sweeteners with a taste profile of pure HFCS 55
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.	EV 310839804 US

APPLICATION ELEMENTS		ADDRESS TO:	
See MPEP chapter 600 concerning utility patent application contents.		Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22314-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>		
3. <input checked="" type="checkbox"/> Specification [Total Pages 12] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 	a. <input type="checkbox"/> Computer Readable Form (CRF)		
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1]	b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper 		
5. Oath or Declaration [Total Sheets 1] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 	c. <input type="checkbox"/> Statements verifying identity of above copies		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	ACCOMPANYING APPLICATION PARTS		
	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney		
	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>		
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
	13. <input type="checkbox"/> Preliminary Amendment		
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>		
	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
	17. <input checked="" type="checkbox"/> Other:.....		

18 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label (insert Customer No. or Attach bar code label here)		<input checked="" type="checkbox"/> Correspondence address below		
Name	ProPat, L.L.C.			
Address	2912 Crosby Road			
City	Charlotte	State	North Carolina	Zip Code
Country	USA	Telephone	(704) 365-4881	Fax
Name (Print/type)	Klaus Schweitzer			Registration No. (Attorney/Agent)
Signature				Date
				July 14, 2003

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17354 U.S. PTO
10/16/03
07/14/03



07/14/03
3156 U.S. PTO

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FEE TRANSMITTAL for FY 2002

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account

Deposit Account Number

50-2193

Deposit Account Name

ProPat, L.L.C.

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	750	2001	375
1002	330	2002	165
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80
SUBTOTAL (1) (\$ 750.00)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
15	-20** =	0 X	= -0-
21	-3*** =		= -0-
Multiple Dependent			

Large Entity		Small Entity	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9
SUBTOTAL (2) (\$ -0-)			

** or number previously paid, if greater; For Reissues, see above

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Susanne RATHJEN
Examiner Name	
Group Art Unit	
Attorney Docket No.	03/056 NUT

FEE CALCULATION (continued)

3. ADDITIONAL FEES	Large Entity	Small Entity	Fee Paid
Fee	Fee	Fee	Fee
1051	130	2051	65
1051	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920	1804	920
1805	1,840	1805	1,840
1251	110	1251	55
1252	410	1252	205
1253	930	1253	465
1254	1,450	1254	725
1255	1,970	1255	985
1401	320	1401	160
1402	320	1402	160
1403	280	1403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Limited Recognition	Telephone
Signature	<i>K. Schweitzer</i>			Date July 14, 2003

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